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CONFIRMATION NO. 3377

<b>SERIAL NUMBER</b> 10/658,736	<b>FILING OR 371(c) DATE</b> 09/09/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> ENDIUS.26CPCP2
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**APPLICANTS**  
 Alan Shluzas, Millis, MA; *OK new*  
 James Pagliuca, Millis, MA; *OK new*  
 John D. Unger, Wrentham, MA; *OK new*

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of PCT/US02/28106 09/05/2002 and is a CIP of 10/280,489 10/25/2002 PAT 7,056,321 which is a CIP of 09/630,077 08/01/2000 PAT 6,530,926 *OK new*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***      **\*\* SMALL ENTITY \*\***  
 12/01/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Nicholas Wurdell</i> Examiner's Signature	<i>new</i> Initials			

**ADDRESS**  
20995

**TITLE**  
Methods and apparatuses for treating the spine through an access device

<b>FILING FEE RECEIVED</b> 685	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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